

## ISSUE SLIP STAPLE AREA (for additional cross references)

31040 9 910691 700

POSITION	INITIALS	ID NO.	DATE
<b>FEE-DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			15 8-30-01
<b>FORMALITY REVIEW</b>	E-H	713	9-24-01
<b>RESPONSE FORMALITY REVIEW</b>	HC	712	01-03-02
	SI	1021	10/16/02
		1071	03/27/03

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 - ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	1	1	5/9/02
2	1	1	6/9/02
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

1030 1/2/02 5323  
1031 2/4/02 5323  
1032 2/4/02 5323If more than 150 claims or 10 actions  
staple additional sheet here

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